## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

~				(703) 746-4000			
appropriate. All further corr indicated unless corrected b maintenance fee notifications	espondence including the P elow or directed otherwise s.	atent, advance ordein Block 1, by (a)	ers and notification specifying a new co	of maintenance fees v rrespondence address;	ired). Blocks 1 through 4 s vill be mailed to the current and/or (b) indicating a sepa	correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use I				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
Paul D. Greeley, I Ohlandt, Greeley, R 10th Floor One Landmark Squ	APR 1 9 2004 50		Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.				
Stamford, CT 06901-2682			Allison Berkman		(Depositor's name)		
		EMARK		allow Britis		(Signature)	
				April 16,	2004	(Date)	
APPLICATION NO. FILING DATE		F	FIRST NAMED INVEN		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/002,013	10/26/2001	Bernd Nebendal			20 01 0437	5028	
TITLE OF INVENTION: SO		D.					
THE OF INVENTION. SC	ATTERING ATTENDATO	K		_			
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330		\$300	\$1630	06/16/2004	
EXAMINER		ART UNIT		ASS-SUBCLASS	]		
NGUYEN, TU T		2877		356-073100			
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The state of the state o				a the patent front page, list (1) the 3 registered patent attorneys or natively, (2) the name of a single a member a registered attorney or ames of up to 2 registered patent atts. If no name is listed, no name  3			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Agilent Technologies, Inc.  Palo Alto, CA							
Please check the appropriate assignee category or categories (will not be printed on the patent);							
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):							
X Issue Fee A check in the amount of the fee(s) is enclosed.							
No Publication Fee □ Payment by credit card. Form PTO-2038 is attached. □ Advance Order - # of Copies □ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to							
Deposit Account Number _50_1078 (enclose an extra copy of this form).							
Director for Patents is reques	sted to apply the Issue Fee ar	nd Publication Fee (	(if any) or to re-apply	any previously paid i	issue fee to the application id	entified above.	
(Authorized Signature)  Add 16/04  NOTE; The Issue Fee and Publication Fed (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.  This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.				04/21/2004 01 FC:1501 02 FC:1504	FMETEKI2 00000060 501 1330.00 DA 300.00 DA	078 10002013	
Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unless been previously submittee (A) NAME OF ASSIGNI AGILENT Te  Please check the appropriate  4a. The following fee(s) are  Issue Fee Dublication Fee Advance Order - # of other  Director for Patents is request  (Authorized Signature)  NOTE; The Issue Fee and other than the applicant; interest as shown by the result of the properties	RESIDENCE DATA TO BI an assignee is identified bel- d to the USPTO or is being s EE Chnologies, assignee category or category enclosed:  Copies  Sted to apply the Issue Fee ar d Publication Fed (if require a registered attorney or age cords of the United States Pa tion is required by 37 CFR by the public which is to fi is governed by 35 U.S.C. I tes to complete, including gr m to the USPTO. Time will the amount of time your rhis burden should be sent if	E PRINTED ON TO  ow, no assignee da  ubmitted under sep  (B)  Inc.  ries (will not be prin  4b.  dd Publication Fee (  (Date)  4/16/  ed) will not be accent; or the assigne  tent and Trademark  1.311. The inform  le (and by the US)  22 and 37 CFR 1.1  thering, preparing, 1  1 vary depending to  equire to complet  o the Chief Inform  of Commerce, Al  TED FORMS TO	HE PATENT (print of ta will appear on the arate cover. Complet of RESIDENCE: (CIT Palo Alto Inted on the patent); Payment of Fee(s): A check in the am Payment by credit of The Director is hoposit Account Nu (if any) or to re-apply (if any) or to	patent. Inclusion of a ion of this form is NO Y and STATE OR CO  CA  individual  ount of the fee(s) is en card. Form PTO-2038 ereby authorized by comber 50-1078 any previously paid in 194/21/2004  01 FC:1501	corporation or other private g closed. is attached. harge the required fee(s), or (enclose an extra issue fee to the application ide  FHETEKI2 00000060 501  1330,00 DA	roup entity  govern	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.